UNITED STATES POSTAL SERVICE



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Sender: Please print your name, address, and ZIP+4 in this box

Susan Webster (6SF-RA) USEPA Region 6 1445 Ross Avenue Dallas, TX 75202-2733

9320762





SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A./ Received by Please Print Clearly) B. Date of Delivery
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	C. Signature Agent Agent Addressee
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Bruce Myerson El Paso Corp 614 Reilly	; ;
Farmington, NM 87410	3. Service Type Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Copy from service label) 7000 0520	0023 4680 4487
PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-99-M-1789

U.S. Postal Service
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) **८**844 46.80 Postage Certified Fee **Postmark** Return Receipt Fee (Endorsement Required) 0023 Here Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 0520 Recipient's Name (Please Print Clearly) (To be completed by mailer)

Strace Myersin El Pasa Carp.

Street, Apt. No.; or PO Box No.

(although the complete of 2000 City, State, ZIP+ 4 Farmingfrn, MM
PS Form 3800, February 2000